SECRETARY OF THE PARAMENTE

14 OCT -1 PM 3: 59

## FEC FORM 2 STATEMENT OF CANDIDACY

| (a) Name of Candidate (in full)   |                             |                    |  |   | N   |
|---|-----------------------------|--------------------|--|---|---|
| Natalie E. Tennant  |                             |                    |  |   |   |
| (b) Address (number and street)<br>P.O. Box 1063  | ☐ Check if address changed  |                    | .3                                     | 2. Candidate's FEC Identification Number<br>S4WV00183 |   |
| (c) City, State, and ZIP Code   |                             |                    | ······································ | 3. Is This New  | Amended                                       |
| Charleston  |                             | WV 2532            | 4                                      | Statement (N)   | OR X (A)                                      |
| 4. Party Affiliation  | 5. Office Sought            |                    | 6. State & Distr                       | rict of Candidate                                     |   |
| DEMOCRATIC PARTY  | Senate                      |                    | W∨                                     | 00  |   |
| DE  | SIGNATION OF P              | RINCIPAL           | CAMPAIGN                               | COMMITTEE   |   |
| 7. I hereby designate the following name  |                             |                    |  | nittee for the 2014 (year of election)                | election(s).                                  |
| NOTE: This designation should be fi   | led with the appropriate of | office listed in t | ne instructions.                       |   |   |
| (a) Name of Committee (in full)   | <b>*</b> .                  |                    |  |   |   |
| Natalie Tennant for   | Senate                      |                    |  | ,   |   |
| (b) Address (number and street)<br>P.O. Box 1063  | -                           |                    |  |   |   |
| (c) City, State, and ZIP Code   |                             |                    |  |   |   |
| Charleston  |                             |                    | WV                                     | 25324   |   |
| - Charleston  |                             |                    |  |   |   |
| I hereby authorize the following name candidacy.  NOTE: This designation should be fit  (a) Name of Committee (in full) |                             |                    |  | nmittee, to receive and expend                        | funds on behalf of my                         |
| Women on the Road   | to the Senate:              | 16 and C           | ounting - S                            | Seattle   |   |
| (b) Address (number and street)<br>120 Maryland Avenue, NE  |                             |                    |  |   | arakanna munu asaranda kamenda kan asarake ka |
| (c) City, State, and ZIP Code   | <del></del>                 |                    | •                                      |   |   |
| Washington .  |                             |                    | DC                                     | 20005   |   |
| l cerlify that I have exa   | mined this Statement and    | to the best of     | my knowledge al                        | nd belief it is true, correct and                     | complete.                                     |
| Signature of Candidate  Natalie E. Tem ant  | V Dom                       | MH                 |  | <b>G</b> 122/2014                                     |   |
| NOTE: Submission of false, erroneous,   | or incomplete information   | n may subject t    | he person signin                       | g this Statement to penalties o                       | of 2 U.S.C. §437g.                            |
|   |                             |                    |  | ·   |   |
| 1.  |                             |                    |  |   |   |
| 1   | <u> </u>                    |                    |  |   | FEC FORM 2 (REV. 02/2009)                     |

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#### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

|  |  | Page 2 / 5              |
|--|--|-------------------------|
|  | HER AUTHORIZED COMMITTEES pint Fundralsing Representatives)  | [ ADDITIONAL ]          |
| I hereby authorize the following named committee, which is NOT my prandidacy.  | rincipal campaign committee, to receive and expend   | funds on behalf of my   |
| NOTE:This designation should be filed with the principal ca  | mpaign committee.  |                         |
| (a) Name of Committee (in full)  Women on the Road to the Senate:  | 16 and Counting - San Francis  | co                      |
| (b) Address (number and street)<br>120 Maryland Avenue, NE   |  |                         |
| (c) City, State and ZIP Code   |  |                         |
| Washington   | DC 20005   |                         |
|  | HER AUTHORIZED COMMITTEES oint Fundraising Representatives)  | [ ADDITIONAL ]          |
| I hereby authorize the following named committee, which is NOT my prandidacy.  | rincipal campaign committee, to receive and expend   | I funds on behalf of my |
| NOTE:This designation should be filed with the principal ca  | ampaign committee,   |                         |
| (a) Name of Committee (in full)  |  |                         |
| Women on the Road to the Senate: 1   | 16 and Counting - Los Angeles  | <b>;</b>                |
| (b) Address (number and street)<br>120 Maryland Avenue, NE   |  |                         |
| (c) City, State and ZIP Code   |  |                         |
|  |  |                         |
| Washington   | DC 20005   |                         |
| DESIGNATION OF OT  | DC 20005  HER AUTHORIZED COMMITTEES  pint Fundraising Representatives)   | [ ADDITIONAL ]          |
| DESIGNATION OF OT  | HER AUTHORIZED COMMITTEES pint Fundraising Representatives)  |                         |
| DESIGNATION OF OT (Including Jo  | HER AUTHORIZED COMMITTEES  oint Fundraising Representatives)  rincipal campaign committee, to receive and expend                     |                         |
| DESIGNATION OF OT (Including Joint Including Joint Including Joint Including Joint Including Joint Including Includi | HER AUTHORIZED COMMITTEES  oint Fundraising Representatives)  rincipal campaign committee, to receive and expend                     |                         |
| DESIGNATION OF OT (Including Joint Including Inc | HER AUTHORIZED COMMITTEES  bint Fundraising Representatives)  rincipal campaign committee, to receive and expend  impaign committee. |                         |
| DESIGNATION OF OT (Including Journal of Including J | HER AUTHORIZED COMMITTEES  bint Fundraising Representatives)  rincipal campaign committee, to receive and expend  impaign committee. |                         |
| DESIGNATION OF OT (Including Journal of Including J | HER AUTHORIZED COMMITTEES  bint Fundraising Representatives)  rincipal campaign committee, to receive and expend  impaign committee. |                         |

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#### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

| FEC Form 2 (Rev. 02/2003)  |   | Page 3 /        |
|--|---|-----------------|
|  | OTHER AUTHORIZED COMMITTEES ag Joint Fundraising Representatives)   | [ ADDITIONAL ]  |
| I hereby authorize the following named committee, which is NOT n candidacy.  | my principal campaign committee, to receive and expend funds o  | on behalf of my |
| NOTE:This designation should be filed with the principal   | al campaign committee.  |                 |
| (a) Name of Committee (in full)  | <u></u>   | <del></del> -   |
| Democratic Victory 2014  |   |                 |
| (b) Address (number and street)<br>600 Pennsylvania Avenue, SE<br>Suite 210  |   |                 |
| (c) City, State and ZIP Code   |   |                 |
| Washington   | DC 20003  |                 |
|  | OTHER AUTHORIZED COMMITTEES ng Joint Fundraising Representatives)   | [ ADDITIONAL ]  |
| Liberaby authorize the following named committee, which is NOT r   | my principal campaign committee, to receive and expend funds  | on behalf of my |
| andidacy.  |   |                 |
| •  |   |                 |
| andidacy.  |   |                 |
| andidacy.  NOTE:This designation should be filed with the principal  |   |                 |
| note: This designation should be filed with the principal (a) Name of Committee (in full)  |   |                 |
| note: This designation should be filed with the principal (a) Name of Committee (in full)  Secure our Senate 2014  (b) Address (number and street) 600 Pennsylvania Avenue, SE   |   |                 |
| (a) Name of Committee (in full)  Secure our Senate 2014  (b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210   |   |                 |
| (a) Name of Committee (in full)  Secure our Senate 2014  (b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210  (c) City, State and ZIP Code Washington  | al campaign committee.  | [ ADDITIONAL ]  |
| (a) Name of Committee (in full)  Secure our Senate 2014  (b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210  (c) City, State and ZIP Code Washington  | DC 20003  OTHER AUTHORIZED COMMITTEES ng Joint Fundraising Representatives)   |                 |
| (a) Name of Committee (in full)  Secure our Senate 2014  (b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210  (c) City, State and ZIP Code Washington  DESIGNATION OF (Including In Including Named Committee), which is NOT in  | DC 20003  OTHER AUTHORIZED COMMITTEES  ng Joint Fundraising Representatives)  my principal campaign committee, to receive and expend funds of                         | •               |
| (a) Name of Committee (in full)  Secure our Senate 2014  (b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210  (c) City, State and ZIP Code Washington  DESIGNATION OF (Including Indicate) (Including Indicate) (Including Indicate)   | DC 20003  OTHER AUTHORIZED COMMITTEES  ng Joint Fundraising Representatives)  my principal campaign committee, to receive and expend funds of                         |                 |
| (a) Name of Committee (in full)  Secure our Senate 2014  (b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210  (c) City, State and ZIP Code Washington  DESIGNATION OF (Includir  I hereby authorize the following named committee, which is NOT reandidacy.  NOTE:This designation should be filed with the principal  | DC 20003  OTHER AUTHORIZED COMMITTEES  ng Joint Fundraising Representatives)  my principal campaign committee, to receive and expend funds of all campaign committee. |                 |
| (a) Name of Committee (in full)  Secure our Senate 2014  (b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210  (c) City, State and ZIP Code Washington  DESIGNATION OF (Including Interest) (Including Int | DC 20003  OTHER AUTHORIZED COMMITTEES  ng Joint Fundraising Representatives)  my principal campaign committee, to receive and expend funds of all campaign committee. | -               |
| note:This designation should be filed with the principal  (a) Name of Committee (in full)  Secure our Senate 2014  (b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210  (c) City, State and ZIP Code Washington  DESIGNATION OF (Including Interest) Candidacy.  NOTE:This designation should be filed with the principal  (a) Name of Committee (in full)  Georgia West Virginia Victory Function  (b) Address (number and street) 600 Pennsylvania Avenue, SE  | DC 20003  OTHER AUTHORIZED COMMITTEES  ng Joint Fundraising Representatives)  my principal campaign committee, to receive and expend funds of all campaign committee. |                 |

#### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

| FEC Form 2 (Rev. 02/2003)  |  |                                       | Page 4 /        |
|--|--|---------------------------------------|-----------------|
| DESIGNATION OF OTH   | IER AUTHORIZED Control of the contro |                                       | [ ADDITIONAL ]  |
| I hereby authorize the following named committee, which is NOT my princandidacy. | ncipal campaign committee, to  | receiv and expend funds               | on behalf of my |
| NOTE:This designation should be filed with the principal can                     | npaign committee.  |                                       |                 |
| (a) Name of Committee (in full)  | *  | ·                                     |                 |
| Off the Sidelines: Senate 2014   |  |                                       |                 |
| (b) Address (number and street)<br>600 Pennsylvania Avenue, SE<br>Suite 210      |  |                                       |                 |
| (c) City, State and ZIP Code   |  | · · · · · · · · · · · · · · · · · · · |                 |
| Washington   | DC   | 20003                                 |                 |
| DESIGNATION OF OTI   | HER AUTHORIZED C   |                                       | [ ADDITIONAL ]  |
| I hereby authorize the following named committee, which is NOT my prirandidacy.  | ncipal campaign committee, to  | receive and expend funds              | on behalf of my |
| NOTE:This designation should be filed with the principal car                     | npaign committee.  |                                       |                 |
| (a) Name of Committee (in full)  |  |                                       |                 |
| Blue Senate 2014   |  |                                       |                 |
| (b) Address (number and street)<br>600 Pennsylvania Avenue, SE<br>Suite 210      |  |                                       |                 |
| (c) City, State and ZIP Code   | ****   |                                       |                 |
| Washington   | DC   | 20003                                 |                 |
| DESIGNATION OF OTI   | HER AUTHORIZED C   |                                       | [ ADDITIONAL ]  |
| I hereby authorize the following named committee, which is NOT my prinandidacy.  | ncipal campaign committee, to  | receive and expend funds              | on behalf of my |
| NOTE: This designation should be filed with the principal car                    | npaign committee.  |                                       |                 |
| (a) Name of Committee (in full)  |  | · <u>-</u>                            | · *****         |
| Grassroots Victory Project 2014  |  |                                       |                 |
| (b) Address (number and street)<br>120 Maryland Avenue, NE                       |  |                                       |                 |
| (a) City. State and ZID Code   |  |                                       |                 |
| (c) City, State and ZIP Code   |  |                                       |                 |

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#### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

|  | Page 5 /  |
|--|---|
| ON OF OTHER AUTHORIZED COMMITTE<br>(Including Joint Fundraising Representatives) | EES [ADDITIONAL]  |
| ch is NOT my principal campaign committee, to receive and e                      | expend funds on behalf of my  |
| e principal campaign committee.  |   |
|  |   |
| Senate 2014  |   |
|  |   |
|  |   |
| WA 98104   |   |
| ON OF OTHER AUTHORIZED COMMITT (Including Joint Fundraising Representatives)     | EES [ADDITIONAL]  |
| ch is NOT my principal campaign committee, to receive and o                      | expend funds on behalf of my  |
| e principal campaign committee.  |   |
|  |   |
|  |   |
| . , , , , , , , , , , , , , , , , , , ,  |   |
| WV 25301   |   |
| ON OF OTHER AUTHORIZED COMMITTE<br>(Including Joint Fundraising Representatives) | EES [ADDITIONAL]  |
| ch is NOT my principal campaign committee, to r and e                            | expend funds on behalf of my  |
| e principal campaign committee.  |   |
|  |   |
|  |   |
|  |   |
|  | (Including Joint Fundraising Representatives) th is NOT my principal campaign committee, to receive and e e principal campaign committee.  Senate 2014  WA 98104  ON OF OTHER AUTHORIZED COMMITT (Including Joint Fundraising Representatives) th is NOT my principal campaign committee, to receive and e e principal campaign committee.  WV 25301  ON OF OTHER AUTHORIZED COMMITT (Including Joint Fundraising Representatives) th is NOT my principal campaign Representatives)  ON OF OTHER AUTHORIZED COMMITT (Including Joint Fundraising Representatives) |

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